

LOUISIANA STATE BOARD OF MEDICAL EXAMINERS

630 Camp Street, New Orleans, LA 70130
(504) 568-6820



Telephone: (504) 568-6820

Fax: (504) 599-0500

Writer's Direct Dial:

Ext. _____

Re: Refund

Dear

The enclosed refund check # _____ is issued for the following reason:

*Non-dispensing Physician (additional
\$50.00 not required)
Late fee not required
Overpayment of verification fee*

*Duplicate payment received
Overpayment (specified at "other")
Other:*

If you have any questions, do not hesitate to contact me by phone at the above number or by email at _____

Sincerely,

Louisiana State Board
of Medical Examiners